

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

B

**WS-01678A**  
**Baca Float Water Company – Water Division**  
**PO Box 1536**  
**Tubac, AZ 85646**

**ANNUAL REPORT**

**FOR YEAR ENDING**

<b>12</b>	<b>31</b>	<b>2007</b>
-----------	-----------	-------------

RECEIVED

APR 11 2008

ARIZONA CORP COM  
Director's Office

FOR COMMISSION USE

<b>ANN 04</b>	<b>07</b>
---------------	-----------

PROCESSED BY:

4-11-08

SCANNED

## COMPANY INFORMATION

**Company Name (Business Name)** Baca Float Water Company Inc (Water Division)

Mailing Address P.O. Box 1536  
(Street)

Tubac AZ 85646  
(City) (State) (Zip)

520-398-3177 520-398-9770  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address bacawater@barriodetubac.com

Local Office Mailing Address P.O. Box 1536  
(Street)

Tubac AZ 85646  
(City) (State) (Zip)

520-398-3177 520-398-9770  
Local Office Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address bacawater@barriodetubac.com

## MANAGEMENT INFORMATION

**Management Contact:** Dick Lockwood Secretary Treasurer (Operations Mgr)  
(Name) (Title)

P.O. Box 1536 Tubac AZ 85646  
(Street) (City) (State) (Zip)

520-398-3177 520-398-9770  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address bacawater@barriodetubac.com

**On Site Manager:** Lino Vega  
(Name)

P.O. Box 1536 Tubac AZ 85646  
(Street) (City) (State) (Zip)

520-398-3177 520-398-9670  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address bacawater@barriodetubac.com

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

**Statutory Agent:** Jacqueline Brasher  
(Name)

P.O. Box 4241 Tubac AZ 85646  
(Street) (City) (State) (Zip)

520-398-2506 520-398-2407  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Attorney:** Michael Milroy-Snell & Wilmer  
(Name)

Once Church Rd Tucson AZ 85701  
(Street) (City) (State) (Zip)

520-882-1200 520-884-1294  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Email Address** \_\_\_\_\_

**X Please mark this box if the above address(es) have changed or are updated since the last filing.**

### **OWNERSHIP INFORMATION**

Check the following box that applies to your company:

- |   |  |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S)    | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P)        | <input type="checkbox"/> Subchapter S Corporation (Z)                                |
| <input type="checkbox"/> Bankruptcy (B)         | <input type="checkbox"/> Association/Co-op (A)                                       |
| <input type="checkbox"/> Receivership (R)       | <input type="checkbox"/> Limited Liability Company                                   |
| <input type="checkbox"/> Other (Describe) _____ |  |

### **COUNTIES SERVED**

Check the box below for the county/ies in which you are certificated to provide service:

- |  |                                   |                                   |
|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> APACHE                | <input type="checkbox"/> COCHISE  | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA                  | <input type="checkbox"/> GRAHAM   | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ                | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE   |
| <input type="checkbox"/> NAVAJO                | <input type="checkbox"/> PIMA     | <input type="checkbox"/> PINAL    |
| <input checked="" type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI  | <input type="checkbox"/> YUMA     |
| <input type="checkbox"/> STATEWIDE             |                                   |                                   |

**UTILITY PLANT IN SERVICE**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (OC)</b>	<b>Accumulated Depreciation (AD)</b>	<b>O.C.L.D. (OC less AD)</b>
301	Organization	0	0	0
302	Franchises	0	0	0
303	Land and Land Rights	1,084	0	1,084
304	Structures and Improvements	57,508	(1,627)	55,881
307	Wells and Springs	121,345	0	121,345
311	Pumping Equipment	22,419	(2,060)	20,359
320	Water Treatment Equipment	142,612	(2,356)	140,256
330	Distribution Reservoirs and Standpipes	0	0	0
331	Transmission and Distribution Mains	1,018,734	(6,400)	1,012,334
333	Services	0	0	0
334	Meters and Meter Installations	39,543	(2,885)	36,658
335	Hydrants	0	0	0
336	Backflow Prevention Devices	0	0	0
339	Other Plant and Misc. Equipment	380,048	0	380,048
340	Office Furniture and Equipment	1,914	(451)	1,463
341	Transportation Equipment	0	0	0
343	Tools, Shop and Garage Equipment	1,321	(397)	925
344	Laboratory Equipment	0	0	0
345	Power Operated Equipment	0	0	0
346	Communication Equipment	0	0	0
347	Miscellaneous Equipment	0	0	0
348	Other Tangible Plant	0	0	0
	<b>TOTALS</b>	<b>1,786,528</b>	<b>(16,175)</b>	<b>1,770,353</b>

This amount goes on the Balance Sheet Acct. No. 108

**CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (1)</b>	<b>Depreciation Percentage (2)</b>	<b>Depreciation Expense (1x2)</b>
301	Organization	0	0	0
302	Franchises	0	0	0
303	Land and Land Rights	1,084	0	0
304	Structures and Improvements	57,508	.49%	283
307	Wells and Springs	121,345	0	0
311	Pumping Equipment	22,419	0	0
320	Water Treatment Equipment	142,612	.36%	514
330	Distribution Reservoirs and Standpipes	0	0	0
331	Transmission and Distribution Mains	1,018,734	.63%	6,400
333	Services	0	0	0
334	Meters and Meter Installations	39,543	1.0%	395
335	Hydrants	0	0	0
336	Backflow Prevention Devices	0	0	0
339	Other Plant and Misc. Equipment	380,048	0	0
340	Office Furniture and Equipment	1,914	15.70%	301
341	Transportation Equipment	0	0	0
343	Tools, Shop and Garage Equipment	1,321	20.02%	264
344	Laboratory Equipment	0	0	0
345	Power Operated Equipment	0	0	0
346	Communication Equipment	0	0	0
347	Miscellaneous Equipment	0	0	0
348	Other Tangible Plant	0	0	0
	<b>TOTALS</b>	<b>1,786,528</b>	<b>.46%</b>	<b>8,157</b>

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_  
Acct. No. 403.

**BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>ASSETS</b>		
	<b>CURRENT AND ACCRUED ASSETS</b>		
131	Cash	\$126	\$(402)
134	Working Funds	0	0
135	Temporary Cash Investments	0	0
141	Customer Accounts Receivable	683	199
146	Notes/Receivables from Associated Companies	0	0
151	Plant Material and Supplies	0	0
162	Prepayments	1,907	1,944
174	Miscellaneous Current and Accrued Assets	0	0
	<b>TOTAL CURRENT AND ACCRUED ASSETS</b>	<b>\$2,716</b>	<b>\$1,741</b>
	<b>FIXED ASSETS</b>		
101	Utility Plant in Service	\$1,557,612	\$1,791,517
103	Property Held for Future Use	0	1,084
105	Construction Work in Progress	0	0
108	Accumulated Depreciation – Utility Plant	(8,300)	(16,175)
121	Non-Utility Property	6,470	3,235
122	Accumulated Depreciation – Non Utility	0	0
	<b>TOTAL FIXED ASSETS</b>	<b>\$1,555,782</b>	<b>\$1,779,661</b>
	<b>TOTAL ASSETS</b>	<b>\$1,350,223</b>	<b>\$1,781,402</b>

**NOTE:** The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

**BALANCE SHEET (CONTINUED)**

<b>Acct. No.</b>		<b>BALANCE AT BEGINNING OF YEAR</b>	<b>BALANCE AT END OF YEAR</b>
	<b>LIABILITIES</b>		
	<b>CURRENT LIABILITIES</b>		
231	Accounts Payable	\$1,875	\$0
232	Notes Payable (Current Portion)	0	0
234	Notes/Accounts Payable to Associated Companies	0	0
235	Customer Deposits	0	0
236	Accrued Taxes	0	1,186
237	Accrued Interest	0	0
241	Miscellaneous Current and Accrued Liabilities	0	0
	<b>TOTAL CURRENT LIABILITIES</b>	<b>\$1,875</b>	<b>\$1,186</b>
	<b>LONG-TERM DEBT (Over 12 Months)</b>		
224	Long-Term Notes and Bonds	\$0	\$0
	<b>DEFERRED CREDITS</b>		
251	Unamortized Premium on Debt	\$0	\$0
252	Advances in Aid of Construction	494,832	0
255	Accumulated Deferred Investment Tax Credits	0	0
271	Contributions in Aid of Construction	1,054,620	1,629,824
272	Less: Amortization of Contributions	0	0
281	Accumulated Deferred Income Tax	0	0
	<b>TOTAL DEFERRED CREDITS</b>	<b>\$1,549,452</b>	<b>\$1,629,824</b>
	<b>TOTAL LIABILITIES</b>	<b>\$1,551,327</b>	<b>\$1,631,010</b>
	<b>CAPITAL ACCOUNTS</b>		
201	Common Stock Issued	\$15,120	\$6,048
211	Paid in Capital in Excess of Par Value	247,202	0
215	Retained Earnings	(463,426)	(349,999)
218	Proprietary Capital (Sole Props and Partnerships)	0	494,343
	<b>TOTAL CAPITAL</b>	<b>\$(201,104)</b>	<b>\$150,392</b>
	<b>TOTAL LIABILITIES AND CAPITAL</b>	<b>\$1,350,223</b>	<b>\$1,781,402</b>

**COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

<b>Acct. No.</b>	<b>OPERATING REVENUES</b>	<b>PRIOR YEAR</b>	<b>CURRENT YEAR</b>
461	Metered Water Revenue	\$85,745	\$32,182
460	Unmetered Water Revenue	0	75,089
474	Other Water Revenues	87,585	19,764
	<b>TOTAL REVENUES</b>	<b>\$173,330</b>	<b>\$127,035</b>
	<b>OPERATING EXPENSES</b>		
601	Salaries and Wages	\$85,379	\$87,266
610	Purchased Water	0	0
615	Purchased Power	5,685	7,655
618	Chemicals	1,795	2,238
620	Repairs and Maintenance	10,786	19,975
621	Office Supplies and Expense	1,808	2,836
630	Outside Services	24,212	38,845
635	Water Testing	622	5,163
641	Rents	11,880	10,577
650	Transportation Expenses	149	206
657	Insurance – General Liability	2,167	6,291
659	Insurance - Health and Life	843	586
666	Regulatory Commission Expense – Rate Case	1,000	1,406
675	Miscellaneous Expense	3,004	868
403	Depreciation Expense	1,756	8,157
408	Taxes Other Than Income	0	7,642
408.11	Property Taxes	1,208	1,680
409	Income Tax	0	0
	<b>TOTAL OPERATING EXPENSES</b>	<b>\$152,294</b>	<b>\$201,391</b>
	<b>OPERATING INCOME/(LOSS)</b>	<b>\$21,036</b>	<b>\$(74,356)</b>
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income	\$0	\$0
421	Non-Utility Income	0	53,651
426	Miscellaneous Non-Utility Expenses	0	0
427	Interest Expense	0	0
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>	<b>\$0</b>	<b>\$53,651</b>
	<b>NET INCOME/(LOSS)</b>	<b>\$21,036</b>	<b>\$(20,705)</b>



**SUPPLEMENTAL FINANCIAL DATA****Long-Term Debt**

	<b>LOAN #1</b>	<b>LOAN #2</b>	<b>LOAN #3</b>	<b>LOAN #4</b>
Date Issued	0	0	0	0
Source of Loan	0	0	0	0
ACC Decision No.	0	0	0	0
Reason for Loan	0	0	0	0
Dollar Amount Issued	\$0	\$0	\$0	\$0
Amount Outstanding	\$0	\$0	\$0	\$0
Date of Maturity	0	0	0	0
Interest Rate	0%	00%	0%	0%
Current Year Interest	\$0	\$0	\$0	\$0
Current Year Principle	\$0	\$0	\$0	\$0

Meter Deposit Balance at Test Year End \$0

Meter Deposits Refunded During the Test Year \$0

<b>COMPANY NAME</b> Baca Float Water Company Inc (Water Division)	
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>

## WATER COMPANY PLANT DESCRIPTION

### WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-558318	10	150	600	6	2	1997
55-558319	50	650	700	10	8	1997
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	00	0	0
0	0	0	0	0	0	0

\* Arizona Department of Water Resources Identification Number

### OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
0	0	0
0	0	0

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
0	0	45	0
0	0	0	0
0	0	0	0
0	0	0	0

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
0	0	7000	1
0	0	0	0
0	0	0	0

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME</b> <u>Baca Float Water Company Inc (Water Division)</u>	
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

**MAINS**

Size (in inches)	Material	Length (in feet)
2	PVC	900
3	0	0
4	PVC	800
5	0	0
6	PVC	9,050
8	PVC	17,500
10	0	0
12	PVC	6,000

**CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X 3/4	307
3/4	46
1	2
1 1/2	0
2	16
Comp. 3	0
Turbo 3	0
Comp. 4	0
Tubo 4	0
Comp. 6	0
Tubo 6	0

**For the following three items, list the utility owned assets in each category for each system.**

**TREATMENT EQUIPMENT:**

Electric-Chlorination-System

---

---

---

**STRUCTURES:**

Covered-Area-for-Electric-and-Other-Equipment

Tuff-Shed-20x30-for-storage-Fenced

Covered-Storage-for-Parts-and-Supplies

---

---

---

**OTHER:**

1-Gas-Generator-250KW

30-Backflow-Preventors

---

---

---

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME:</b> Baca Float Water Company Inc (Water Division)	
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2007**

MONTH/YEAR	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	273	1,385	1,567	0
FEBRUARY	278	1,323	1,446	0
MARCH	281	1,723	1,878	0
APRIL	288	1,671	1,818	0
MAY	295	2,185	2,209	0
JUNE	301	2,494	2,635	0
JULY	310	2,017	2,116	0
AUGUST	311	1,905	1,968	0
SEPTEMBER	316	1,855	1,913	0
OCTOBER	338	1,758	1,952	0
NOVEMBER	343	1,694	1,933	0
DECEMBER	359	1,330	1,573	0
<b>TOTALS →</b>		<b>21,340</b>	<b>23,008</b>	<b>0</b>

What is the level of arsenic for each well on your system? \_\_\_\_\_ mg/l

(If more than one well, please list each separately.) 55-558318:.005

55-558319:.022

If system has fire hydrants, what is the fire flow requirement? 1,125 GPM for 4 hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?

( X ) Yes                      ( ) No

Is the Water Utility located in an ADWR Active Management Area (AMA)?

( X ) Yes                      ( ) No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?

( ) Yes                      ( X ) No

If yes, provide the GPCPD amount: \_\_\_\_\_

***Note: If you are filing for more than one system, please provide separate data sheets for each system.***

COMPANY NAME Baca Float Water Company Inc (Water Division) YEAR ENDING 12/31/2007

**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2007 was: \$ 1,680.06

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. \_\_\_\_\_

---

---

---

---

---

Santa Cruz County Treasurer			9/28/2007		
Date	Type	Reference	Original Amt.	Balance Due	Discount
09/27/2007	Bill	P#951-33-501 3	1,680.06	1,680.06	
				Check Amount	
					Payment
					1,680.06
					1,680.06

Bank of the West 368 Parcel #951-33-501 3: full year payment

1,680.06

PARCEL NUMBER

**VERIFICATION  
AND  
SWORN STATEMENT**  
**Taxes**

**VERIFICATION**

STATE OF \_\_\_\_\_  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME)
NAME (OWNER OR OFFICIAL) TITLE
COMPANY NAME

**DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2007

**HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.**

**SWORN STATEMENT**

**I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.**

**I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.**

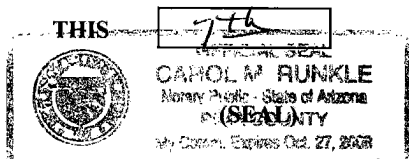
  
\_\_\_\_\_  
SIGNATURE OF OWNER OR OFFICIAL

520-398-3177

\_\_\_\_\_  
TELEPHONE NUMBER

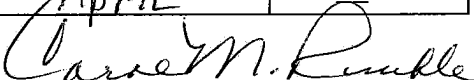
**SUBSCRIBED AND SWORN TO BEFORE ME**

**A NOTARY PUBLIC IN AND FOR THE COUNTY OF**



**MY COMMISSION EXPIRES** 10-27-08

COUNTY NAME	Santa Cruz	
MONTH	April	2008

  
\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC



**COMPANY NAME** Baca Float Water Company Inc (Water Division) **YEAR ENDING 12/31/2007**

**INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported \$(20,705.45)  
Estimated or Actual Federal Tax Liability \_\_\_\_\_

State Taxable Income Reported \$(20,705.45)  
Estimated or Actual State Tax Liability \_\_\_\_\_

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances \_\_\_\_\_  
Amount of Gross-Up Tax Collected \_\_\_\_\_  
Total Grossed-Up Contributions/Advances \_\_\_\_\_

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

  
\_\_\_\_\_  
**SIGNATURE**

04/04/08  
\_\_\_\_\_  
**DATE**

Gary P. Brasher  
\_\_\_\_\_  
**PRINTED NAME**

President  
\_\_\_\_\_  
**TITLE**

RECEIVED  
JAN 10 2008  
SANTA CRUZ  
COUNTY CLERK

**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

**VERIFICATION**

STATE OF \_\_\_\_\_  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME)
NAME (OWNER OR OFFICIAL) TITLE
COMPANY NAME

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

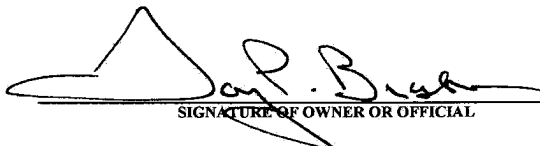
IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2007 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 187,766

(THE AMOUNT IN BOX ABOVE  
INCLUDES \$ 7,080  
IN SALES TAXES BILLED, OR COLLECTED)

**\*\*REVENUE REPORTED ON THIS PAGE MUST  
INCLUDE SALES TAXES BILLED OR  
COLLECTED. IF FOR ANY OTHER REASON,  
THE REVENUE REPORTED ABOVE DOES NOT  
AGREE WITH TOTAL OPERATING REVENUES  
ELSEWHERE REPORTED, ATTACH THOSE  
STATEMENTS THAT RECONCILE THE  
DIFFERENCE. (EXPLAIN IN DETAIL)**

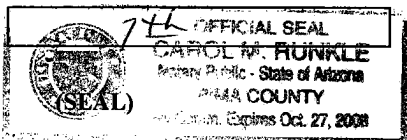
  
SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

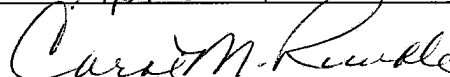
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS



DAY OF

COUNTY NAME	<u>Santa Cruz</u>	
MONTH	<u>April</u>	<u>2008</u>

  
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 10-27-08

**VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
Intrastate Revenues Only**

**VERIFICATION**

**STATE OF ARIZONA**

**I, THE UNDERSIGNED**

**OF THE**

COUNTY OF (COUNTY NAME)	
NAME (OWNER OR OFFICIAL)	TITLE
COMPANY NAME <u>Baca Float Water Company Inc (Water Division)</u>	

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2007 WAS:

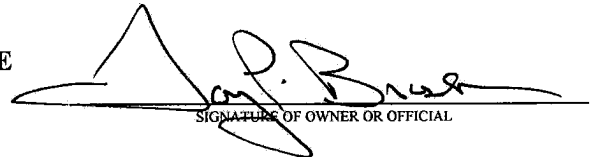
ARIZONA INTRASTATE GROSS OPERATING REVENUES

**\$ 187,766**

**THE AMOUNT IN BOX AT LEFT  
INCLUDES \$ 7,080**

**IN SALES TAXES BILLED, OR COLLECTED)**

**\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.**

  
SIGNATURE OF OWNER OR OFFICIAL  
  
520-398-3177  
TELEPHONE NUMBER

**SUBSCRIBED AND SWORN TO BEFORE ME**

**A NOTARY PUBLIC IN AND FOR THE COUNTY OF**

**THIS**

7<sup>th</sup>

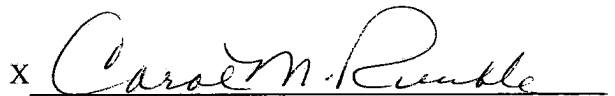
**DAY OF**

NOTARY PUBLIC NAME <u>Carol M. Runkle</u>	
COUNTY NAME <u>Santa Cruz</u>	
MONTH <u>April</u>	YEAR <u>2008</u>



CAROL M. RUNKLE  
Notary Public - State of Arizona  
Santa Cruz County  
My Commission Expires Oct. 27, 2008

**MY COMMISSION EXPIRES 10-27-08**

**x**   
SIGNATURE OF NOTARY PUBLIC